

SECTION FOUR
ADDITIONAL SCHOOL SITE INFORMATION
(COMPLETE SEPARATE PAGE FOR EACH SITE)

School Name: _____ Site CTDS # _____.

Physical Address: _____
_____.

Site Contact Person: _____
Name / Title

Site Phone # _____ Fax # _____.

Site E-Mail Address: _____.

School District(s) in which site is located: _____.

This site is: (Check one only)

- ☐ Day Program Only
☐ Residential School Only
☐ Both Day and Residential

Was this site approved for the 2005-2006 school year? ☐ YES ☐ NO

**** If "NO", site must be inspected by ADE before final approval will be given. ****

Check all grades to be served at this site:

- ☐ PreSchool "Description of Service Delivery" form must be completed and submitted to be approved for this grade level.
- ☐ Kindergarten
- | | | | |
|---------------------------------|---------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> First | <input type="checkbox"/> Fourth | <input type="checkbox"/> Seventh | <input type="checkbox"/> Tenth |
| <input type="checkbox"/> Second | <input type="checkbox"/> Fifth | <input type="checkbox"/> Eighth | <input type="checkbox"/> Eleventh |
| <input type="checkbox"/> Third | <input type="checkbox"/> Sixth | <input type="checkbox"/> Ninth | <input type="checkbox"/> Twelfth |